



**NOTICE OF INTENT**  
**For**  
**Baseline General Permit to Discharge**  
**Stormwater Associated with Industrial Activity**

Mark only one item

1. ☒ Existing Facility
  2. ☐ New Facility
  3. ☐ Construction Activity
  4. ☐ Change of Information
- Permit No. \_\_\_\_\_

**I. OPERATOR or CONTRACTOR**

<b>Name</b> King County International Airport	
<b>Mailing Address</b> P.O. Box 80245	
<b>City</b> Seattle, WA	<b>Zip + 4</b> 98108
<b>Contact Person</b> Jeffrey W. Winter	<b>Phone #</b> (206) 296-7380

**II. OWNER/REPRESENTATIVE OF SITE OR FACILITY**

<b>Name</b> KING COUNTY INTERNATIONAL AIRPORT	
<b>Mailing Address</b> PO Box 80245	
<b>City</b> Seattle, WA	<b>Zip + 4</b> 98108
<b>Contact Person</b> Jeffrey W. Winter	<b>Phone #</b> (206) 296-7380

**III. FACILITY/SITE ADDRESS**

<b>Facility Name</b> Airport Maintenance Shop		
<b>Street Address</b> 6518 Ellis Avenue South		
<b>City</b> Seattle, WA	<b>Zip + 4</b> 98108	<b>Phone #</b> (206) 296-7380
<b>County</b> King		

**IV. BILLING ADDRESS:**

<input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Operator	<input type="checkbox"/> Facility/Site <input type="checkbox"/> Other (below)
<b>Name</b> Same as Owner	
<b>Address</b>	
<b>City</b>	<b>Zip + 4</b> <b>Phone #</b>

**V. RECEIVING WATER INFORMATION**

<b>A. Does your facility's storm water discharge to: (check all that apply)</b>	
1. <input checked="" type="checkbox"/> Storm sewer system—Owner of storm sewer system (name): <u>King County Airport</u>	
2. <input type="checkbox"/> Directly to surface waters of Washington state (e.g., river, lake, creek, estuary, ocean)	
3. <input checked="" type="checkbox"/> Indirectly to waters of Washington state	
4. <input type="checkbox"/> Directly to ground waters of Washington state: <input type="checkbox"/> dry well <input type="checkbox"/> drainfield <input type="checkbox"/> other	
<b>B. Name(s) of receiving water(s):</b> <u>Duwamish Waterway</u>	
Initial discharge is to an unnamed receiving water? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

**VI. INDUSTRIAL ACTIVITY INFORMATION**

<b>A. SIC Code(s)</b> 1. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 2. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 3. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 4. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<b>B. Type of business</b> <u>Maintenance Shop</u>	
<b>C. Industrial activities at facility: (check all that apply)</b>			
1. <input type="checkbox"/> Manufacturing	5. <input checked="" type="checkbox"/> Vehicle Storage	9. <input type="checkbox"/> Steam Electric Power Generation	
2. <input type="checkbox"/> Material Handling	6. <input checked="" type="checkbox"/> Vehicle Maintenance	10. <input type="checkbox"/> Scrapyard, salvage, auto recycling, battery reclaimer	
3. <input checked="" type="checkbox"/> Material Storage	7. <input type="checkbox"/> Municipal Sewage Treatment	11. <input type="checkbox"/> Landfill or Land Application	
4. <input type="checkbox"/> Hazardous Waste Treatment, Storage, or Disposal Facility (RCRA Subtitle C)		12. <input type="checkbox"/> Mining	
			12. <input type="checkbox"/> Other